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⁷⁹⁸⁸⁸ Mann+Humme	7590 07/18 21 GMBH	oock 1 for any change of address)	Fe paj hav	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
Department VR- Hindenburgstr. 4 Ludwigsburg, 71	15		Sta ado tra				
GERMANY				(Depositor's name)			
			<u> </u>			(Signature)	
						(Date)	
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/578,187	10/578,187 05/01/2007		Karl-Ernst Hummel	2190/US 8422		8422	
TITLE OF INVENTION: NON-POSITIVE-DISPLACEMENT MACHINE COMPRISING A SPIRAL CHANNEL PROVIDED IN THE HOUSING MIDDLE PART							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	10/18/2011	
EXAMINER ART		ART UNIT	CLASS-SUBCLASS	7			
HAMO, PATRICK		3746	417-407000	!			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
AASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) AANN + HUMBL CMBH LUDWIGSBURG, GERMANY Please check the appropriate assignee category or categories (will not be printed on the patent):							
			Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 504629 (enclose an extra copy of this form).				
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submitting the complete	application form to the	e USPTO. Time will vary	depending upon the indi	vidual case. Any co	mments on the amount of ti	me you require to complete	

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